



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/798,488
		Filing Date	March 11, 2004
		First Named Inventor	Tomohiro Hamada
		Art Unit	2835
		Examiner Name	Zachary Pape
Total Number of Pages in This Submission	6.	Attorney Docket Number	6639P012

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <div style="margin-left: 20px;"> <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) </div> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <div style="margin-left: 20px;"> <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA </div> <div style="margin-left: 20px;"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </div> </div>	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	<div style="border: 1px solid black; padding: 5px; height: 60px; vertical-align: top;"> 3 Prior art references </div>	
			<div style="border: 1px solid black; padding: 5px; height: 60px; vertical-align: top;"> Remarks </div>	
			Prior art references not included in total page count.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	August 31, 2005

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Susan McFarlane		
Signature		Date	August 31, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 06/04/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



FEET TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\$)** **180.00**

Complete if Known

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Art Unit	2835
Attorney Docket No.	6639P012

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	20	20*	= 0 X 50.00 =	\$0.00
Independent Claims	3	5* = 0 X 200.00 =	\$0.00	
Multiple Dependent				

Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	Filing a submission after final rejection (37 CFR § 1.129(b))	
Other fee (specify)		SUBTOTAL (2)		(\$)	180.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature				Date	08/31/05



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of:

TOMOHIRO HAMADA, ET AL.

Application No.: 10/798,488

Filed: March 11, 2004

For: **Electronic Apparatus Comprising
Keyboard-Mounted Housing**

Art Group: 2835

Examiner: Zachary Pape

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed). This IDS and IDS Citation Form are being submitted before the mailing of a final Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

09/08/2005 BABRAHA1 00000042 10798488

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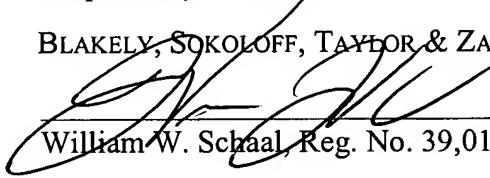
The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

The fee set in the amount of \$180.00 for submission of the Information Disclosure Statement is enclosed herewith. Please charge any additional fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

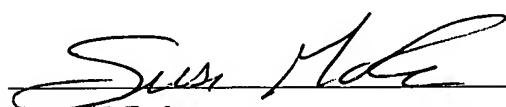
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: August 31, 2005


William W. Schaal, Reg. No. 39,018

12400 Wilshire Boulevard, 7th Floor
Los Angeles, CA 90025
Telephone: (714) 557-3800

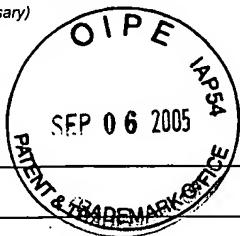
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Susan McFarlane 08-31-05
Date

Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)



Sheet 1 of 1

Complete if Known

Application Number	10/798,488
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First Named Inventor	Hamada, Tomohiro
Group Art Unit	2835
Examiner Name	Pape, Zachary

Attorney Docket No: 6639P012

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	Filing Date If Appropriate
	US-2005-0040972A1	02/24/2005	Hamada, Tomohiro			04/26/2004
	US-2005-0041378A1	02/24/2005	Hamada, Tomohiro			04/08/2004
	US-4,864,523	09/05/1989	Sasaki, Katumaru			09/02/1987
	US-5,335,141	08/02/1994	Hosoi, Takashi			09/03/1993
	US-5,483,418	01/09/1996	Hosoi, Takashi			04/21/1995
	US-5,689,400	11/18/1997	Ohgami, Keizo , et al.			05/04/1995
	US-5,808,860	09/15/1998	Ohgami, Keizo , et al.			02/07/1997
	US-5,808,861	09/15/1998	Nakajima, Kabushiki			07/31/1996
	US-6,198,626	03/06/2001	Nakajima, Yuji , et al.			06/26/1998
	US-6,610,944	08/26/2003	Lee, Seong-Ho , et al.			09/11/2002
	US-6,661,650	12/09/2003	Nakajima, Yuji , et al.			07/24/2002

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Class	Subclass	T ²
	JP-05-053711	03/05/1993	Hanasato, Tadatsohi			
	JP-05-210725	08/20/1993	Otsuki, Misao			
	JP-06-187090	07/08/1994	Tanaka, Hiroyuki			

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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EXAMINER**DATE CONSIDERED**

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 809. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional) ² Applicant is to place a check mark here if English language Translation is attached